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**REQUEST  
FOR  
CONTINUED EXAMINATION (RCE)  
TRANSMITTAL**

Subsection (b) of 35 U.S.C. § 132, effective on May 29, 2000, provided for continued examination of a utility or plant application filed on or after June 8, 1995.

See The American Inventors Protection Act of 1999 (AIPA).

<b>Application Number</b>	09/883,002
<b>Filing Date</b>	June 15, 2001
<b>First Named Inventor</b>	Shaw et al.
<b>Group Art Unit</b>	3711
<b>Examiner Name</b>	William M. Pierce
<b>Attorney Docket Number</b>	930016-2002

This is a Request for Continued Examination (RCE) under 37 C.F.R. § 1.114 of the above-identified application.

Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application. See Instruction Sheet for RCEs (not to be submitted to the USPTO) on page 2.

1.	Submission required under CPR 1.114.
a.	<input type="checkbox"/> Previously submitted <ul style="list-style-type: none"> <li>i. <input type="checkbox"/> Consider the amendment(s)/reply under 37 CFR 1.116 previously filed on _____ (Any unentered amendment(s) referred to above will be entered)</li> <li>ii. <input type="checkbox"/> Consider the arguments in the Appeal Brief or Reply Brief previously filed on _____</li> <li>iii. <input type="checkbox"/> Other</li> </ul>
b.	<input checked="" type="checkbox"/> Enclosed (via facsimile) <ul style="list-style-type: none"> <li>i. <input checked="" type="checkbox"/> Preliminary Amendment Under 37 C.F.R. 1.114 w/ Request for One Month Suspension of Examination Under 37 C.F.R. 1.103 (c)</li> <li>ii. <input type="checkbox"/> Affidavit(s)/Declaration(s)</li> <li>iii. <input type="checkbox"/> Information Disclosure Statement (IDS)</li> <li>iv. <input type="checkbox"/> Other</li> </ul>
2.	Miscellaneous
a.	<input type="checkbox"/> Suspension of action on the above-identified application is requested under 37 CFR 1.103(c) for a period of ____ months. (Period of suspension shall not exceed 3 months; Fee under 37 CFR 1.17(l) required)
b.	<input type="checkbox"/> Other
3.	<b>Fees</b> The RCE fee under 37 CFR 1.17(e) is required by 37 CFR 1.114 when the RCE is filed. <ul style="list-style-type: none"> <li>a. <input checked="" type="checkbox"/> The Director is hereby authorized to charge any additional fees, or credit any overpayments, to Deposit Account No. 50-0320.</li> <li>b. <input type="checkbox"/> Check in the amount of \$790.00 is enclosed for the following:           <ul style="list-style-type: none"> <li>i. <input type="checkbox"/> RCE fee required under 37 CFR 1.17(e)</li> <li>ii. <input type="checkbox"/> Extension of time fee (37 CFR 1.136 and 1.17)</li> <li>iii. <input type="checkbox"/> Other</li> </ul> </li> <li>c. <input type="checkbox"/> Payment by credit card (Form PTO-2038 enclosed)</li> </ul>

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED**

Name (Print/Type)	Howard C. Lee	Registration No. (Attorney/Agent)	48,104
Signature	<i>Howard C. Lee</i>		
Date	September 13, 2005		

**CERTIFICATE OF MAILING OR TRANSMISSION**

I hereby certify that this paper is being facsimile transmitted (along with a Preliminary Amendment) to the Patent and Trademark Office on the date shown below.

Name (Print/Type)	Howard C. Lee	Registration No. (Attorney/Agent)	48,104
Signature	<i>Howard C. Lee</i>		
Date	September 13, 2005		

**Burden Hour Statement:** This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND FEES AND COMPLETED FORMS TO THE FOLLOWING ADDRESS: Mail Stop RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

3173-1001P  
D9/883002

## CLAIMS AS FILED - PART I

(Column 1) (Column 2)

TOTAL CLAIMS	17	
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	17 minus 20 =	*
INDEPENDENT CLAIMS	1 minus 3 =	*
MULTIPLE DEPENDENT CLAIM PRESENT		<input type="checkbox"/>

\* If the difference in column 1 is less than zero, enter "0" in column 2

SMALL ENTITY  
TYPE  OTHER THAN  
OR SMALL ENTITY

RATE	FEES	RATE	FEES
BASIC FEE	355.00	OR BASIC FEE	710.00
X\$ 9=		OR X\$18=	
X40=		OR X80=	
+135=		OR +270=	
TOTAL	355	OR TOTAL	

## CLAIMS AS AMENDED - PART II

(Column 1) (Column 2) (Column 3)

AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	• 18	Minus	.. 20 =
Independent	• 8	Minus	... 3	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				<input type="checkbox"/>

OTHER THAN  
SMALL ENTITY OR SMALL ENTITY

RATE	ADDI- TIONAL FEE	RATE	ADDI- TIONAL FEE
X\$ 9=		OR X\$18=	
X40=		OR X80=	
+135=		OR +270=	
TOTAL ADDIT. FEE		OR TOTAL ADDIT. FEE	←

9/3/05

AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	• 16	Minus	.. 20 =
Independent	• 8	Minus	... 3	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				<input type="checkbox"/>

RATE	ADDI- TIONAL FEE	RATE	ADDI- TIONAL FEE
X\$ 9=		OR X\$18=	
X40=		OR X80=	
+135=		OR +270=	
TOTAL ADDIT. FEE		OR TOTAL ADDIT. FEE	←

AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	•	Minus	..
Independent	•	Minus	...	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				<input type="checkbox"/>

RATE	ADDI- TIONAL FEE	RATE	ADDI- TIONAL FEE
X\$ 9=		OR X\$18=	✓
X40=		OR X80=	
+135=		OR +270=	
TOTAL ADDIT. FEE		OR TOTAL ADDIT. FEE	

- \* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
- \*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
- \*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
- The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.